

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

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Alison Lundergan Grimes Kentucky Secretary of State Received and Filed: 5/20/2014 12:00 AM

Fee Receipt: \$90.00

ivision of Business Filings Certificate of Authority				FBE
Business Filings PO Box 718	(Foreign Business	•		
Frankfort, KY 40602	(. 0.0.g., 2.0	····· ·),		
(502) 564-3490				
www.sos.ky.gov				
Pursuant to the provisions of KRS 14A a on behalf of the entity named below and	nd KRS 271B, 273, 274,275, 3 for that purpose, submits the f	62 and 386 the undersigned here ollowing statements:	eby applies for au	uthority to transact business in Kentucky
1. The entity is a: profit corporation (KRS 271B). nonprofit corporation (KRS 273). professional service corporation (KRS 274). professional limited liability company (KRS 275).				
limited par	tnership (KRS 362).			
2. The name of the entity is Reese Central Wholesales Inc. (The name must be identical to the name on record with the Secretary of State.)				
3. The name of the entity to be used in Kentucky is (if applicable): (Only provide if "real name" is unavailable for use; otherwise, leave blank.)				
4. The state or country under whose law the entity is organized is Indiana				
5. The date of organization isand the period of duration is				
6. The mailing address of the entity's pr			(If	left blank, the period of duration is considered perpetual.)
1155 E. 54th Street	mapar omoo io	Indianapolis	IN	46220
Street Address		City	State	Zip Code
		,		
7. The street address of the entity's reg	•	Lauda, dila	18.1	40040
3720 South 7th Street Road		Louisville	IN .	40216
Street Address (No P.O. Box Numbers)	Otamban T. I	City	State	Zip Code
and the name of the registered agent at	that office is Stephen 1. I	MCCOMDS		
8. The names and business addresses of the entity's representatives (secretary, officers and directors, managers, trustees or general partners):				
Stephen T. McCombs - CFO/Treasurer	1155 E. 54th Street	Indianapolis	!N	46220
Name	Street or P.O. Box	City	State	Zip Code
Darren Stiffler - President	1155 E. 54th Street	Indianapolis	łN	46220
Name	Street or P.O. Box	City	State	Zip Code
John Reese - CEO	1155 E. 54th Street	Indianapolis	IN	46220
Name	Street or P.O. Box	City	State	Zip Code
 9. If a professional service corporation, all the individual shareholders, not less than one half (1/2) of the directors, and all of the officers other than the secretary and treasurer are licensed in one or more states or territories of the United States or District of Columbia to render a professional service described in the statement of purposes of the corporation. 10. I certify that, as of the date of filing this application, the above-named entity validly exists under the laws of the jurisdiction of its formation. 				
11. If a limited partnership, it elects to be a limited liability limited partnership. Check the box if applicable:				
11. It a limited partnership, it elects to	be a limited liability limited pa	artnership. Check the box it at	oplicable: []	
12. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is				
0-10	<u></u>	Otrahan T Magamba O	F0/T	(Delayed effective date and/or time)
Skuller & . Me	un	Stephen T. McCombs - C	FO/Treasurer	
Signature of Authorized Representative		Printed Name & Title		Date
Stephen T. McCombs, consent to serve as the registered agent on behalf of the business entity.				
Type/Print Name of Registered Agent				
Stephen & m			FO/Treasur	
Signature of Registered Agent (01/12)	Printed Na	me T	itle .	Date